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CONFIRMATION NO. 6286

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|------------------------------------|---|---------------------|-------------------------------|---|
| SERIAL NUMBER 10/721,701 | FILING OR 371(c) DATE 11/25/2003 RULE | CLASS 435 | GROUP ART UNIT 1643 | ATTORNEY DOCKET NO. 12.009011-2 |
|------------------------------------|---|---------------------|-------------------------------|---|

APPLICANTS
 David Hung, Belmont, CA;
 Phillip M. Olsen, Mountain View, CA;

**** CONTINUING DATA *******
 This application is a CON of 09/502,206 02/10/2000 ABN which is a CIP of 09/313,463 05/17/1999 PAT 6,638,727 which claims benefit of 60/117,281 01/26/1999 *KAL*

**** FOREIGN APPLICATIONS ******* *(none) KAL*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
 ** 03/26/2004

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|--|---|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>David H. Olsen</i> Examiner's Signature Initials | STATE OR COUNTRY CA | SHEETS DRAWING 9 | TOTAL CLAIMS 34 | INDEPENDENT CLAIMS 4 |
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ADDRESS
000038732

TITLE
Methods and devices for delivery of agents to breast milk ducts

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| FILING FEE RECEIVED 619 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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